

## Participation is Critical as Healthcare Reform Charges Ahead

Advocacy representatives and system-level CFOs from throughout the Catholic health ministry gathered in Washington, D.C., Sept. 21, to learn about and discuss the latest details surrounding healthcare reform efforts in Congress. Representing FHCM were James Vopat, senior vice president of finance, and Scott McConnaha, director of corporate relations. Scheduling of the 2009 Catholic Legislative Advocacy Conference, hosted by the Catholic Health Association, proved quite timely as health reform legislation continues to move along quickly.

would preserve provider conscience protections and not expand the funding of abortion services with federal funds; would encourage improvements in quality and efficiency; and would ensure that we, as providers, are not disproportionately burdened with funding reform," McConnaha said.

Almost 100 lawmakers or their staffers were visited by members of the Catholic health ministry, who each carried the same, consistent message that upholds our principles and core values. To see the principles and core values, along with many other helpful resources and tools for better understanding what it is we would like to accomplish with health reform, visit [www.catholichealthcare.us/OurVision](http://www.catholichealthcare.us/OurVision).

piece of legislation. Once that is approved by the full Congress, it gets sent to the President for his approval or veto. All along the way, there will be debating and amending, so this is not the time to sit back and merely watch the process happen. We can still affect change.



### ***We can all play a part***

The message to our legislators is simple: we believe that healthcare in the U.S. should be available and accessible to everyone; health and prevention oriented; sufficiently and fairly financed; transparent and consensus-driven; patient-centered and designed to address needs at all stages of life; and safe, effective and designed to deliver the greatest possible quality.

Not only is the message simple, but telling our elected officials about it is rather easy, too. Just visit [www.chausa.org](http://www.chausa.org), scroll to the bottom, right of the page, and click on the picture of the Capitol building, where it says "Take action now!" Here you will find interactive tools for finding out who your senators and representatives are and for drafting e-mail letters to them about our expectations for reform. Now is the time for us to do our part. Change is coming in healthcare; let's make sure we help affect those changes for the betterment of our communities, our fellow healthcare workers, and the healthcare ministry across America.

The following day, conference participants were encouraged to visit Capitol Hill and meet with their senators and representatives to discuss health reform. McConnaha met with the healthcare legislative assistants in the offices of Senators Herb Kohl (D-Wis.) and Russ Feingold (D-Wis.) and Representative Tom Petri (R-Wis.). "In each of these meetings, I expressed our expectation that reform measures would expand healthcare coverage and access to all Americans;

### ***Five becomes two, two become one***

The goal that something be passed by the end of the year remains, which means there are roughly two months for both houses of Congress to combine the efforts of their various committees (two in the Senate and three in the House) into single health reform bills. This will take us from five pieces of legislation down to two. The next step will be to combine the House bill and Senate bill into a single



*President Barack Obama speaks to a joint session of Congress regarding healthcare reform.*

### **MISSION STATEMENT**

*The MISSION of the Franciscan Sisters of Christian Charity HealthCare Ministry is to carry out the commitment of the Sponsor to the healing mission of the Catholic Church through the provision of quality healthcare services. In a spirit of partnership of dedicated religious and lay caregivers, the Franciscan Sisters of Christian Charity HealthCare Ministry will strengthen the Sponsor's commitment by managing change, ensuring stewardship of resources and integrating mission and values.*

## Message from the President

Dear Friends,

Greetings to you on this beautiful and glorious autumn day. The sun is shining on trees that have turned to vibrant shades of gold, red and brown. The air is brisk and invigorating and it is great to be alive! (In this era of transparency and integrity, I guess I should tell you that the above statements are not true, they are, rather, the way I want today to be.) Actually, today is rainy, gloomy and cold. The sun has not shone for several days and it takes a real effort to keep my spirits up as I face the reality of another winter on the way. I know that the sun will shine again, but I know it from faith and science, not from current experience and emotion. In the meantime, I need to get out my winter clothes and put away summer, do the fall cleaning and generally be ready for the cold, snowy days ahead.

In some ways, my experience with the weather can be likened to the country's experience with healthcare reform. Depending on who you talk to we are either facing a utopian experience of full access and coverage or a catastrophe of monumental proportions as the government invades private industry and destroys the free market. My guess is that we will have some manner of health reform by January and it will not be as good or as bad as predicted. It will be somewhere in between. I have learned to trust in the Lord on matters like this and encourage our member institutions to continue their efforts in providing high quality care to their patients, residents and families no matter where health reform takes us.



*Sr. Laura Wolf*

This issue of Ministry Report focuses on the efforts underway at each of our member sites to prepare for the changes to come. You will find that each organization has taken a unique and thus far successful approach to reform. Accessibility, affordability, quality and safety, and information technology have emerged as key focus areas. All of our organizations are addressing these topics, which factor quite prominently in reform measures, in some form or other in their operations. What I find interesting and impressive is that these very concerns have been on the agenda for our member institutions for the past ten years. They have been important to us not because they are targets of health reform, but because they are core to our mission of serving our mission and our communities. I hope you find the submissions from our member institutions interesting and encouraging.

I know that our board and management leaders are concerned about the future. It is normal for us to be anxious about an unclear future that, at least at this time, we cannot control. My solution to sleepless nights is twofold. I have learned to trust in the skills and commitment of our governance and management leaders to steward well the ministry entrusted to them. My second tack is to entrust this all to the Lord and believe that "He will guard that which He has entrusted to us." (2 Tim. 1, 12)

God bless you all,  
Sister Laura

## Fostering our Ministry of the Church

The mission and values statements of the Franciscan Sisters HealthCare Ministry are quite clear in expressing our fidelity to the healing mission of the Catholic Church. Because of this commitment, we work closely with our local bishops as we strive to offer comfort and care to everyone who seeks our services, especially the poor and vulnerable.

Here are the bishops who shepherd the church in the communities served by FHCM organizations. We look forward to many years of working with them in bringing alive Jesus' healing ministry.



### **Archbishop George J. Lucas** **Archdiocese of Omaha**

Archbishop George J. Lucas was installed as archbishop of the Omaha Archdiocese on July 22, 2009. He comes to Omaha after serving nearly 10 years in the Diocese of Springfield in Illinois. Born June 12, 1949, in

St. Louis, Archbishop Lucas was ordained a priest of the Archdiocese of St. Louis on May 24, 1975. He holds a bachelor's degree in philosophy and a master's in history.



### **Bishop Frederick F. Campbell** **Diocese of Columbus**

Bishop Frederick F. Campbell was installed as bishop of the Columbus Diocese on January 13, 2005. Prior to that, he served as auxiliary bishop of the Archdiocese of Saint Paul and Minneapolis. Born August 5,

1943, in Elmira, New York, Bishop Campbell was ordained a priest for the Archdiocese of Saint Paul and Minneapolis on May 31, 1980. He earned a bachelor's degree in history and foreign language as well as a master's and Ph.D. in history.



### **Bishop David L. Ricken** **Diocese of Green Bay**

Bishop David L. Ricken was installed as bishop of the Green Bay Diocese on Aug. 28, 2008. Prior to that, he served as bishop of the Diocese of Cheyenne, Wyo., for seven years. A native of Dodge City, Kan., Bishop Ricken was born

on Nov. 9, 1952. He was ordained a priest of the Pueblo Diocese in Colorado on Sept. 12, 1980. He has a bachelor's degree in philosophy, a master's in sacred theology, and a licentiate degree in canon law.

## *Genesis Has EPIC Plans –Integrated Clinical Information System Moves Forward*

Genesis HealthCare System has a large-scale strategic initiative underway to move the organization into the future and re-create the organization. Genesis is now implementing an integrated clinical information system that will utilize electronic medical records (EMR) and give its physicians and employees many of the tools they need to provide the highest level of quality care.

A team of Genesis clinicians, IT staff, physicians and administrative support personnel selected EPIC as the system for Genesis. Much work was done to prepare a timeline and implementation plan for EPIC, and after the Genesis Board of Directors approved the plan, the project is now underway.

EPIC is the single largest investment in Genesis' history, and with it the way health care is delivered in Zanesville and the surrounding community will be transformed. The new system will be beneficial to physicians, employees and volunteers as they go about their daily activities at Genesis, but it is the patients who will benefit the most.

The system, to be put into use in two phases, will replace most of the individual clinical information systems currently used. The first phase will include the functions needed to have a clinical EMR for patients. Expected to go live by Nov. 1, it will include such things as electronic orders and results review, clinical and physician documentation, and electronic bar-coding to monitor patient medication and identification. The EMR will also be incorporated into many community physician offices during this phase, enhancing continuity of care at all levels of the patient's experience.

The second phase of the project will begin in fall 2011 and be completed in the fourth quarter of 2012. This phase will incorporate inpatient registration, hospital billing, management reporting functions and scheduling. It will even include "My Chart," which will enable patients to access their medical records through the website.

This is a huge project. It has already consumed many hours of work studying systems, deciding what will

work for Genesis and putting a plan in place. Now, as the real work begins, all employees will be involved at some level – learning new processes, experiencing enhanced efficiencies and sharing their pride in this exciting new technology with friends and neighbors. The resulting process changes will enable Genesis to deliver higher quality care and better service that is more cost efficient for our patients.

Physicians also have an opportunity to use the EPIC system in their offices to enhance patient care and their medical records. Informational sessions have been held to explain the plans for the EPIC system as well as options available to physicians who may want to be included in the system.

EPIC will bring a lot of exciting changes at Genesis that will greatly enhance patient care and free up resources for other important strategic initiatives at our organization. Fully integrating this powerful technology is another opportunity to prove Genesis is serious about its commitment to become the community's first choice when they seek compassionate, quality healthcare.



## *Franciscan Care Services Focuses on Teamwork to Ensure Safe Care for Patients*

Franciscan Care Services is working to improve staff members' communication skills in an effort to make care even safer for all of its patients. Four employees and our CEO, Ron Briggs, recently attended a specialized team training session in Kearney, Neb. The training was designed to improve communication among all staff members who interact on a daily basis under fast-paced conditions. Those who attended the two-and-a-half-day training were Delaney Brudigam, RN, Danielle Ehrisman, RT, Sharon Paasch, RN, and Anne Timmerman, MT (ASCP).

The training, called TeamSTEPPS, is designed to help improve teamwork across

the facility. TeamSTEPPS stands for Team Strategies and Tools to Enhance Performance and Patient Safety. TeamSTEPPS focuses on specific skills supporting team performance, including training requirements, behaviors, human factors, and cultural change designed to improve quality and patient safety.

"Teamwork and communication are often the key factors in determining whether patients receive outstanding care or whether they don't," said TeamSTEPPS Master Trainer, Katherine Jones, PT, PhD, assistant professor at the University of Nebraska Medical Center (UNMC) in Omaha.



photo by Mary Timmerman  
Left to right: Sharon Paasch, RN; Anne Timmerman, MT (ASCP); and Delaney Brudigam, RN. Not pictured, Danielle Ehrisman, RT.

FCS continued

“This training was designed to provide specific tools and strategies that can help hospitals improve communication within all clinical and non-clinical areas.”

To implement the tools and strategies needed to improve communication and teamwork in our organization, we are participating in UNMC’s project, “TeamSTEPPS Training in Critical Access Hospitals.” This project will build on findings from UNMC’s previous project, “Implementing a Program of Patient Safety in Small Rural Hospitals.”

Implementation will begin in January 2010 with the training of our managers first, followed by the rest of the clinical and non-clinical staff. Our physicians will be trained in a separate session by a physician master trainer.

It is important for everyone to know the skills and be able to use the tools to enhance communication and teamwork to provide the best care for patients. Based on findings from Franciscan Care Service’s March 2009 survey on patient safety culture, the organization’s overall strengths and

weaknesses were identified and now the training and tools provided by TeamSTEPPS will be used to bridge the gap between those strengths and weaknesses.

**Access is Key**

Like all healthcare providers, FCS is anxiously watching developments with federal health reform legislation. Franciscan Care Services was founded on a commitment to those in need, and that mission is just as important today.

Part of that mission is providing the finest primary care possible to all we serve, whether they have the financial means to pay for it or not. Franciscan Care Services offers reduced cost and charity care for those with demonstrated financial need.

Access to local primary care was in jeopardy many years ago. Because of this, FCS began recruiting and employing new medical staff members in 1995 to improve and maintain access to primary medical care. Recruitment has continued as needed, and the organization happily welcomes family physician Renae Meyer, MD, who will begin this coming summer. Distance is

also a barrier to care in our service area, so FCS operates four clinics—including rehab and lab services in some cases—in nearby communities.

**Construction Continues**

Franciscan Care Services’ hospital patient addition project continues to move forward. The new patient parking area is beginning to take shape and the corner of Decatur and Monitor has re-opened. The community is getting very excited as folks can now see what the new parking area will be like and can begin to visualize how the new tower will be added to our campus.



Franciscan Care Services - St. Joseph’s Retirement Community

Submitted by Teresa Hasenkamp, Community Relations Coordinator & Development Director

**St. Joseph’s Retirement Community Reaches Area Seniors with “Helping Hands”**

Since its introduction in May, St. Joe’s Helping Hands has made caregiving services much more accessible to area senior citizens. St. Joe’s Helping Hands currently serves clients in West Point, Dodge, Scribner, Howells and Pender, Neb. “We knew there was a need for more in-home services for the elderly here in West Point, but we’ve been a little surprised at the response from the surrounding communities,” said Jerry Wordekemper, St. Joseph’s Retirement Community administrator.

The service provides assistance with routine home tasks such as cleaning, dusting, vacuuming, laundry, and grocery shopping. Companion and personal care services such as help with bathing and dressing, medication reminders, playing games, providing appointment reminders, reading, and diet monitoring also are available. Over-night stays were recently

added in response to client requests.

Clients are able to choose how often, for how many hours (minimum of two hours), and when they need “Helping Hands” assistance. The Helping Hands caregivers enjoy this flexibility as well, matching their preferred schedules to clients’ schedules. Helping Hands is currently staffed with 14 part-time caregivers. The service utilizes staff from Franciscan Care Services, as well as newly hired staff. “We’ve found that the scheduling and caregiving tasks particularly appeal to retired or semi-retired individuals,” said Wordekemper. “These workers tend to be very dependable and responsible, so we’re already building a good reputation.”

St. Joe’s Helping Hands compliments the services already provided by St. Francis Home Health and Hospice. “We know people are looking for a full array of



supportive services that can be provided in their own homes,” explained Wordekemper.

Another benefit of the service is that St. Joe’s Helping Hands will acquaint clients with St. Joseph’s caring staff. Should the time come for a clients to move out of his or her home, hopefully this already established relationship will go a long way toward making St. Joseph’s Retirement Community their choice for assisted living.



## *Holy Family Memorial Ready for Reform with Improvement and Innovation*

The I's have it at Holy Family Memorial. That is: Improvement and Innovation are being consistently communicated and trumpeted in every corner of the organization. As one of HFM's four key strategies, this one is solidly taking center stage as we prepare for healthcare reform.

Recently, HFM was given high scores on the "Reform Readiness" continuum by Kaufman Hall, a nationally recognized healthcare strategic and financial management consulting firm. Many facets of HFM's structure and performance lend themselves favorably to meeting the reform challenge. The network is striving, however, to make its way even higher on the continuum, by becoming more efficient, making patients' experiences more memorable, and assuring a workforce and culture that is ready for tomorrow. Holy Family is embracing improvement and innovation with full gusto.



*Reviewing Bright Idea submissions are, left to right, seated, Cheryl Terp, Ann Leifer, Molly Cianfarani and Mary Maurer, and standing, Paul Lacosse and Scott McMeans.*

to patient navigators; from enhanced electronic patient communication to modified internal processes, billing procedure reviews, and surgical scheduling changes. Results have been encouraging as they measure both blue dollars (i.e., systems improvements which enhance experiences but not necessarily the bottom line) and green dollars (i.e., improvements or ideas which positively impact both the bottom line and experiences).

Improvement and innovation involve fascinating changes of mindset and behavior, especially as all involved focus, not on yesterday, but on what lies ahead. To get there, the present days are filled with energy, commitment and a growing sense of vision from the entire HFM team.



### ***A Team Approach***

Improvement efforts center on methodology from Lean HealthCare and Six Sigma, and are heralded by HFM's Improvement Team. Innovation efforts focus on incremental improvements, leveraging current business models and 'blue ocean strategy' and are led by the network's Innovation Team.

Both teams consist of employees from all levels and areas of the network and report progress to various board committees and ultimately to the full Board of Directors. To date, HFM has received hundreds of "Bright Ideas" from hundreds of employees, eager to offer up small and large ideas for improvement and innovation. Projects range anywhere from the creation of out-of-county clinics



### ***Leading the Way with Technology***

HFM is proud to have been recently recognized as one of the top 25 Most Wired Small and Rural Hospitals and as a HIMSS Analytics Stage 6 Hospital. Focused on information technology, HFM received these distinctions for its advanced clinical IT system, including 100 percent CPOE, with a full electronic ambulatory record system as well. The technology improvements enhance patient safety and efficiency.

### ***Women's Health Initiative***

HFM recently launched Women's One Stop 2 Health program wherein women come to one location to receive their annual female exam including mammogram, physical, and cholesterol screen – all in 90 minutes, with results available within 48 hours. This convenient and quick arrangement has been extremely well received.

### ***Preparing for H1N1***

HFM launched a creative, convenient way to help the community prepare for and deal with the H1N1 flu. In addition to holding community and employer education sessions on the virus, HFM's Lakeshore Pharmacy is selling 'Stay Well' and 'Get Well' flu baskets, filled with items to prevent and deal with the flu. Baskets are delivered right to customers' homes. Just one more innovative way to keep the community healthy.



### *St. Paul Elder Services Encourages Independence through Innovative Program*

In response to health care reform strategies that promote effective care management and utilization of resources, St. Paul Elder Services has proactively developed an innovative program called St. Paul At Home, which will enable a growing aging population to remain in the place that they call “home” independently for a longer period of time. To promote aging responsibly, St. Paul At Home will provide an individualized home assessment completed by a licensed social worker and nurse who will design a personal service plan.

Affordable services offered will include personal care assistants, transportation services, social enrichment opportunities, medication management, emergency response systems, a qualified vendor list, meals on wheels, and access to our life enrichment programs including Club Gabriel Adult Day Center, Cloud Walkers foot care program, Healing Waters therapy pool classes, massage services, and ear care.

St. Paul At Home recognizes that new technology, if simplified, can be accessible to everyone. The most unique feature will be the GrandCare product, a sophisticated security and communication system utilizing frontier technology. Technology-enabled aging systems are demonstrating significant progress in

preventing crises and delaying or averting costly long-term care. St. Paul Elder Services is the regional distributor of the GrandCare system and can provide it to individuals or other organizations to serve their own clients.

In a major study of a home monitoring system with 250 individuals with congestive heart failure, there was an overall 49 percent decrease in doctor office visits, ER visits, hospital admissions, and number of inpatient days. Through the use of GrandCare’s wireless sensors placed in the home, an individual’s routine movement can be established and any diversion will be detected and reported to a designated care partner through e-mail or automated call.

In addition, it can monitor health changes like weight, blood pressure and glucose levels, and provide reminders of appointments and medication times. Favorite music, weather and popular games are available in a very user-friendly one-touch format, and distant care partners may send photos and messages through their own remote computers. The system is designed to provide peace of mind for the care

partners, improve multi-generational communication and socialization opportunities, and increase freedom for the individual.



*Villa resident Dorothy Ducat and Julie Feil, social worker.*

St. Paul At Home is dedicated to promoting enjoyable, healthier aging by empowering individuals to remain as active and independent as possible on their own terms. Aside from aligning very well with healthcare reform initiatives, St. Paul At Home stretches the individual’s retirement savings substantially, while giving them the gift of preventative, quality care in their own home setting. St. Paul Elder Services looks forward to becoming part of the solution to the challenging healthcare issues faced today.



# Sisters Gather to Celebrate a Ministry of Healthcare

Submitted by Sister Martin Flavin

Franciscan HealthCare Ministry used the occasion of its Sisters Health Assembly to begin the commemoration of the system's 25 years of service in the healthcare ministry of the Sponsor, the Franciscan Sisters of Christian Charity. With a theme "Franciscan Servants of God: Reflections from 25 Years of Service," the October 10-11, 2009, gathering of all the FSCC Sisters associated with the healthcare ministry at this present time began with a review of service provided in Saint Rita Health Center and Holy Family Convent Health Clinic.



Sister Mary Kaye Winkler, RN, MHA, director of nursing for Saint Rita's, outlined the changes in the care of community members during the past 25 years, stressing particularly the increase in acuity and longevity among the residents resulting in an increase in staff and care.

"Care requires much more attention today," Sister Mary Kaye observed, "because of multiple chronic conditions, more rehabilitation, increased standards for terminal care, feeding tubes, as well as emphasis on constant assessment of all residents." Sister Mary Kaye concluded her review by saying that "as it was in 1985, so it is today, compassionate care matters most."



*Sister Mary Kaye with some of her staff.*

Sister Caritas Strodthoff continued the retrospective of community health services during the past 25 years by first taking her audience on a pictorial tour of the three areas of the Motherhouse in which the Holy Family Convent Health Clinic has been located. Sister Caritas, the head of the clinic, then described the changes in personnel and in procedures from 1985 until the present. She described the effects that medical and computer technology has had on the work of the clinic, especially immunizations and the various clinics, such as wound, pain and anticoagulation clinics. At present, Sister Caritas and Sister Anne Turba, who completed her master's degree as an adult nurse practitioner in 2004, conduct the clinic with the aid of three lay women.



*Sister Caritas*



*Sister Anne*



*Back to front: Ruth Brey, Clair Drews and Jean Naidl from Holy Family Health Clinic.*

Sister Laura Wolf, FHCM president, continued the retrospective of the healthcare ministry through her presentation, FSCC HealthCare Ministry: A Journey to Excellence. Having served as president of the sponsored healthcare ministry organization since its formation, she led her audience through the 25-year history with apparent enthusiasm and an evident sense of gratitude.

After discussing the efforts of the sisters to meet health needs of local communities and to provide adequate governance by the congregation leadership, Sister Laura recalled the formation of Health Advisory Services, May 13, 1985, whose functions were: liaison between the General Administration and sponsored facilities. She then outlined the challenges facing the ministry in 1985 and reviewed the procedures by which the ministry could be strengthened.

Assembly participants relived with Sister Laura the history of the development of the

ministry from 1985 to the present, a movement from construction through consolidation to integration. To better reflect its purposes, the system changed its name to Franciscan HealthCare Ministry in 1993. Slides of construction projects at each site, of signings of mergers and partnerships, of relocations of buildings, all brought signs of recognition to the audience. Sister Laura then presented a study of each component of the Franciscan HealthCare Ministry system with 1985 and 2009 statistics such as: number of beds; types of service; administrators; employed sisters; sisters in governance; and sister volunteers/sponsor presence representatives. In concluding the retrospective, she iterated the 2009 purpose of FHCM: to carry out the commitment of the sponsor by managing change, ensuring stewardship of resources, and integrating mission and values. She summarized the status of each organization, the financial position of FHCM, governance and sponsorship, and the role of the new services: advocacy and quality, in relation to the FHCM mission.

To situate the ministry and its activities in the present, Sister Laura called on Scott McConnaha, FHCM's director of corporate relations, who addressed the group on health reform and its implications.

At the Saturday afternoon session, Sister Patricia Linsen, FHCM's vice president of mission, who was in charge of the assembly, invited the sisters to join a discussion group according to their present service status: community service, volunteer, or employee. Each group talked about the impact of their position on themselves, on those with whom they come in contact, and the future of the ministry in relation to the present efforts with healthcare reform. Sisters Laura, Patricia and Helena Young, FHCM's director of quality and compliance, facilitated the discussions.

On Sunday, following Morning Prayer and Mass with the Motherhouse community, Sister Louise Hembrecht, community director, chose as a theme for her presentation "Francis and the Role of Service." She invited participants to spend time in reflection and then in sharing with others in small groups on the relationship of service and prayer.

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## FHCM Welcomes New Board Member



*Sister Anne Turba*

Sister Anne Turba is no stranger to the healthcare ministry of the Franciscan Sisters of Christian Charity. Over the past 25 years, she has worked as a nurse at Good Samaritan in Zanesville, Ohio, and Holy Family Memorial in Manitowoc, Wis., and has served on the boards of directors for Holy Family Memorial and St. Paul Elder Services in Kaukauna, Wis. Now, as a new member of FHCM's Board of Directors, Sr.

Anne said she looks forward to "seeing the whole picture, how our services in each local area are performing, the dreams and plans of the local leadership for the ministry there and then how each local ministry affects and supports the ministry as a whole."

Currently, Sister Anne is one of two nurse practitioners serving the healthcare needs of her fellow sisters at the community's Health Clinic located at the Motherhouse in Manitowoc. She has worked there for the past five years. "Our work, like most primary care clinics, includes care of episodic illness and regular monitoring of the health and treatment of those with chronic illness," she explained. "We also focus on preventative care, intervening early in health concerns before the issues become major illnesses." Before coming to the Health Clinic, Sister Anne spent two years at Marquette University in Milwaukee earning a master's degree in nursing, with

the focus of adult nurse practitioner.

The middle child of nine, Sister Anne grew up on a dairy farm near the little village of St. Anna, about 30 miles southwest of Manitowoc. The Franciscan Sisters of Christian Charity served in St. Anna from the very early 1900s until about 1980. "I had our sisters for teachers through all eight years of grade school," she said. "The goodness of so many of them had a definite influence on my decision to join this community."

Regarding the community's long history of providing healthcare services, Sister Anne said it's all about responding to people's needs. "Though providing healthcare in the present day has become more complex, it is good to remember that it was a challenge as well at the end of the 19<sup>th</sup> century when we first ventured into this ministry. I am grateful and proud that, as a

community, we have remained committed to the ministry of healthcare and continue to work with the people of Kaukauna, Manitowoc, West Point, Neb., and Zanesville to provide for the health needs of their communities."

Apart from her work in healthcare, Sister Anne said she enjoys outdoor activities such as gardening and hiking and also enjoys playing the bass in their convent guitar group. "I dabble in various crafts such as knitting and quilting, and have recently taken up a new hobby of mosaic work," she said.

While serving on the FHCM Board, Sister Anne said she is "committed to giving thoughtful attention and action; responding to the ever changing needs of healthcare in the communities we serve."



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